

03973730

PERIODIC MANDATORY VEHICLE INSPECTION CERTIFICATE

Manitoba W02-1

Vehicle Standards and Ins... Box 45064 Regent Postal C... Winnipeg, MB, R2C 5G7 1-204-985-0920

Manitoba A982460

Date Inspection Started: 09 06 29 DAY MO. YR.
 Date Inspection Completed: 16 06 29 DAY MO. YR.
 Inspection Expiry Date: 30 06 28 DAY MO. YR.

Station Number: A610107 Northline Service Station Name
 City: _____
 Mechanic Number: M75911 Mechanic Signature: _____ Station Phone Number: 204 334 2025

Vehicle Owner: Alexander G Hupp
 Address: Northline Moving Solutions Inc. City: _____ Province: _____ Postal Code: _____ Phone: _____

Pass/Safe Vehicle
 Fail/Unsafe Vehicle
 Fail/Hazardous

Licence Number: NDPLATE Prov. _____ NSC #: 1610436 Odometer Reading: 144789 Odom. Type: km mi

Vehicle Identification Number: 1XKWD49X89R937B30 Make: KW Model: W100 Year: 09 Unit #: _____
 Confirmed legible Vehicle Identification Number on vehicle

THE FACILITY AND INSPECTOR MUST BOTH BE AUTHORIZED FOR CLASS OF VEHICLE INSPECTED

Truck GWR _____ KGS _____ Truck Tractor Trailer Semi-Trailer Bus School Bus Coach Bus

List of applicable items to be inspected is in the Table of Contents of National Safety Code Standard 11 Part B

P	R	Mark "X" under "R" when item Rejected "XX" under "R" when item Hazardous "X" under "P" when item Corrected or No Defects found in Section
		Section 1 - Power Train: Defects (if any) <i>Check engine light illuminated, low coolant lamp on</i>
X	X	Section 2 Suspension: Defects (if any) <i>Truck tie rods and bushings worn, lateral drive axle stuck, rear trailing arm</i>
X	X	Section 3 - Brake Systems: Defects (if any) <i>3H 3A Air brake RED check adjuster not holding</i>
X	X	Section 4 - Steering: Defects (if any) <i>Return line leaking</i>
X	X	Section 5 - Instruments & Auxiliary Equipment: Defects (if any) <i>Fire extinguisher not secured</i>
X	X	Section 6 - Lamps: Defects (if any) <i>No fender markers</i>
X	X	Section 7 - Electrical System: Defects (if any)
X	X	Section 8 - Body: Defects (if any) <i>L mirror loose, Lumper loose/cracked on L.S, hood hinges worn</i>
X	X	Section 9 - Tire & Wheel: Defects (if any) <i>Advise LFI drive tire, stem cap missing, low tire pressures</i>
X	X	Section 10 - Coupling Devices: Defects (if any) <i>Fifth wheel out of adjustment</i>

Brake Inspection Type: A B **C** D E Circle appropriate Letter for Internal Brake Component Inspection

Axle	Lining		Drum/Rotor		Stroke	
	L	R	L	R	L	R
1	9/16	9/16				
2	1/2	5/8				
3	9/16	5/8				
4						
5						

Final Measurement

Axle	Tread Depth				Air Pressure			
	Initial		Corrected		Initial		Corrected	
	L	R	L	R	L	R	L	R
1	9	11			105	100		
2	14	12	12	15	75	90	80	90
3	13	7	22	23	90	20	90	90
4								
5								

- THIS INSPECTION IS NOT A WARRANTY - This inspection addresses standards of safety and repair that a vehicle must meet as prescribed by the Vehicle Safety Inspection Regulation but does not guarantee these components will comply with the standards for any unspecified future period of time.

Remarks:

I am aware that the above-noted vehicle is unsafe to be operated on a highway until repairs or adjustments have been made to restore it to safe condition and an inspection mechanic has re-inspected the vehicle. Operating a vehicle with a Hazardous defect may result in further enforcement action if confirmed by a Peace Officer. If this vehicle is not returned within 14 days for re-inspection a complete inspection will be required.

Vehicle received without repairs by: _____ Signature _____ Date: _____